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FOR ACTION

COUNTRY PROGRAMME RECOMMENDATION**/

Cameroon

Addendum

SUMMARY

The present addendum to the country note submitted to the Executive Board at its first regular session in 1997 contains the final country programme recommendation for Board approval.

The Executive Director recommends that the Executive Board approve, under the programme for Cameroon, the amount of $6,500,000 from general resources, subject to the availability of funds, and $5,900,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the period 1998 to 2001.

*/ E/ICEF/1997/20.

**/ The original strategy note provided only indicative figures for estimated programme cooperation. The figures provided in the present addendum are final and take into account unspent balances of programme cooperation at the end of 1996. They will be contained in the "Summary of 1997 recommendations for general resources and supplementary funding programmes" (E/ICEF/1997/P/L.18).

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THE SITUATION OF CHILDREN AND WOMEN

1. Cameroon is a country of incalculable human, agricultural and mineral resources; it is a bilingual State with a population of 13.2 million and a very diversified social and cultural environment. In 1996 it adopted a new Constitution, which seeks to introduce administrative decentralization and strengthen local institutions. Protection of the family, children and women is also covered in the Constitution, which thus creates a favourable environment for the implementation of the Convention on the Rights of the Child and the Convention of the Elimination of All Forms of Discrimination against Women. Despite a complex political situation, the democratic process continued with the holding of municipal elections in 1996 and parliamentary elections in March 1997; a presidential election is planned for the end of 1997. As indicated in the country note (E/ICEF/1997/P/L.1), the economic situation remains worrying and growth is proving slow to take off.

2. The infant mortality rate and the under-five mortality rate improved between 1987 and 1995 from 95 to 66 and 156 to 106 per 1,000 live births respectively, but these rates are still high. They are due in part to inadequate action targeted specifically at the causes of mortality in this age group: malaria, acute respiratory infections, diarrhoeal illnesses and measles, aggravated by the fact that about a quarter of children under five suffer from malnutrition. Since the maternal mortality rate remains unchanged at 550 per 100,000 live births, risk-free childbirth is a strategic necessity in Cameroon.

3. The redirection of primary health care (PHC) has been delayed by the after-effects of the economic crisis and by the lack of support from the authorities for want of a clear definition of health policies and adequate resource allocation. Expenditure on basic health accounted for only 10.3 per cent of the total expenditure of the health sector in 1994-1995.

4. The relatively well-developed education system has undergone a general decline from a net enrolment rate of 68 per cent in 1991 to 58 per cent in 1995 (according to the Government), with sharp disparities between regions, sexes and social classes. In Adamawa, North and Far North provinces some 64 per cent of children of school age have no schools to go to. The gap between the attendance rates of boys and girls is 14 per cent, while nationally it stands at about 9 per cent. The drop-out rate is also fairly high among girls, which means that a large number of women are unprepared to participate in the development of Cameroon society. The decline in basic education requires a redirection of budgetary resources to this subsector, which at present takes up only 8 per cent of the national budget.

5. The high rate of illiteracy among women is due in part to the high non-enrolment rate, inadequate access of girls to education, and a tradition and customs which do not recognize equal status for women.

6. Despite the investments made in the social sector in the past, much remains to be done to ensure respect for the rights of children and women to survival, protection and development. The incipient economic recovery, the continuing process of democratization, and the need to fight poverty while at the same time cutting public expenditure mean that the country's social and

economic policies must be redirected towards sustainable human development and the implementation of the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women.

PROGRAMME COOPERATION, 1996-1997

7. The interim cooperation programme for 1996-1997 resulted in: (a) attainment of the mid-decade goals for universal iodization of salt, the eradication of dracunculosis and the use of oral rehydration therapy (ORT); (b) increased access to school for girls in the northern provinces; and (c) improved provision of information to women and mobilization and participation of women in the implementation of the programme of action of the Fourth World Conference on Women.

8. The health and nutrition programme achieved its objectives by: (a) supporting the revitalization of 80 health centres, training personnel and establishing the medicines distribution system; and (b) funding the immunization of 246,000 children and 260,000 women. The final phase of the eradication of dracunculosis has been established on the basis of an epidemiological monitoring programme and the supply of filters, together with a programme on safe water supply and health education for community leaders.

9. The basic education programme provided the necessary technical and material assistance for the training of 317 primary teachers. It also funded the repair of 18 primary schools, installing in them "book banks" run by parents' associations; as a result of the training and information provided for 20,000 families, parents have taken on board basic ideas concerning gender equality and the rights of women and girls. A total of 105 community leaders also received training which will enable them to boost the development of an educational climate more favourable to girls in Adamawa, North and Far North provinces. This project established a method of supplying equipment to encourage poor parents to send their daughters to school. This equipment includes desks and French-language and mathematics textbooks and it has given 25,000 of the 60,000 targeted girls access to education.

10. The advocacy and social communication programme has led to the creation of several national groups such as "parliamentarians and mayors for children", which have influenced decision-makers and public opinion concerning children's issues. The programme supported the training of 250 community workers and 300 journalists and social workers in community approaches and inter-personal communication and in the Convention on the Rights of the Child. The organization of a mini-summit for African children, on the fringe of the 32nd summit meeting of the Heads of State of the Organization of African Unity in Cameroon, gave birth to the movement for the creation of children's parliaments in the countries of the subregion. In addition, the programme prepared and produced audiovisual materials which were distributed to more than 100,000 people throughout the country, thus contributing tangibly to the dissemination of "Facts for Life" and the Convention on the Rights of the Child.

11. The integrated development programme, which is concerned with the protection and development of Baka and Badjéli children (indigenous forest-

dwellers) in eastern Cameroon, provided access to drinking water for 10,000 Baka families, trained 25 traditional midwives, and equipped 10 preschool centres, in application of the right of children of minority groups to health and education. In the Far North and the urban zones the project funded the training of 300 community agents and the distribution of oral rehydration salts (ORS). Some 1,000 kiosks for the distribution/sale of ORS sachets were established in 10 Baka villages and peri-urban districts in Maroua, Garoua, Ngaoundéré and Douala. Ten national non-governmental organizations (NGOs) are collaborating with UNICEF in the protection of children in difficult situations. A total of 500 NGO members and 300 State employees received training in the Convention of the Rights of the Child and the treatment of children in difficult situations. The programme supported the African Committee to Combat Harmful Traditional Practices of Cameroon with a view to developing, in collaboration with the World Health Organization, an action plan for the eradication of the sexual mutilation of women.

Lessons of recent cooperation

12. The attainment of the programme goals, such as the iodization of salt and use of ORT, generated some optimism for the development of a more ambitious programme of community empowerment and national capacity building. Despite the rather timid implementation of the Bamako Initiative by redirecting attention to PHC, a national strategy has been adopted, the legal framework put in place, and a reference framework established for the revitalization of the health centres supported by UNICEF. The Government remains very dependent on external aid for the operation of the health system. An analysis of cooperation highlighted the different perceptions emerging from the vertical, integrated approaches, which fall short particularly with respect to coverage under the expanded immunization programme, and from the relative balkanization of other donor programmes.

13. Although the European Union recently took responsibility for Cameroon's requirements for medicines and partly for vaccines, worries remain about the external financing of the strengthening of the health sector. Hence the need for UNICEF to mobilize supplementary funds.

14. As part of the assessment of the previous programme and of the collaboration with the World Bank, a study on poverty in Cameroon has furnished data on the situation of children and women in the family setting, particularly in single-parent families. The recommendation is that the next cooperation programme should rely on the kind of advocacy that will encourage the Government and all the other social partners to make a greater financial commitment.

15. Insufficient access by women and girls to education and information is a major constraint on the alteration of harmful health patterns and on the perpetuation of gains. One initiative that deserves to be continued concerns the education of girls in Far North province. This successful experiment by UNICEF and the Government has enabled 25,000 girls to remain in school and the communities to participate in the education of their children. In addition, better statistics on education and the other sectors has proven to be absolutely necessary as a means of improving the decisions taken on the planning of social services.

16. In the previous programme a great deal of attention was given to the service delivery strategy. The deterioration in the economic and social situation and the inadequate performance of basic services were highlighted in the situation analysis. As a result, UNICEF wishes to shift attention in the new programme towards the component on national capacity building.

17. In the light of the financial constraints and the experience gained in the field, UNICEF has identified partners among the international NGOs (i.e. CARE, International Plan, etc.) with a view to incorporating the water supply and sanitation activities in the health and education projects. The water and sanitation programme has been broken down in the other country programme activities.

RECOMMENDED PROGRAMME COOPERATION, 1998-2002

General resources : 6 500 000
Supplementary funds : 5 900 000

Recommended programme cooperation a/

(In thousands of United States dollars)

	General resources	Supplementary funds b/	Total
Social policy and statistics	1 750.0	1 000.0	2 750.0
Health and nutrition	2 187.5	2 500.0	4 687.5
Basic education	1 500.0	1 900.0	3 400.0
Advocacy and communication	500.0	500.0	1 000.0
Intersectoral expenditures	562.5	-	562.5
Total	6 500.0	5 900.0	12 400.0

a/ The breakdown of planned yearly expenditures appears in table 3.

b/ Projects to be financed from supplementary funds already available are added to this figure.

Programme goals and objectives

18. The programme is based on the Government's priorities, especially with respect to the development of policies and programmes for children and women which, under Cameroon's development programme, form part of the battle against poverty. It is based on the recommendations of the World Summit for Children and the provisions of the Convention on the Rights of the Child and the Convention on the Elimination of all Forms of Discrimination Against Women. The programming process has been developed with the active participation of national leaders in conjunction with the United Nations agencies, other bodies and donors and national and international NGOs.

19. The programme will have a national cover with respect to advocacy and some other activities, with specific actions in the priority areas of Far North, North, Adamawa and East provinces and the poor districts of Douala and Yaoundé, which account for more than a half of the country's population. These areas, in which activities were carried out under the preceding programme, were chosen on the grounds of their poverty and the disparities between boys and girls. UNICEF will also support: (a) decentralization by improving the local capacity to plan and manage social programmes; (b) complementarity of the actions at the centre (with a view to producing policies and strategies for children and women) and field activities (which demonstrate the effectiveness and justification of these approaches); and (c) reduction of gender inequalities by means of measures for girls and women.

20. On the basis of the situation analysis and the lessons drawn from earlier cooperation, new policies have been introduced in order to improve the long-term results and impact of the UNICEF support. For example, the provision of services strategy will be operated on a more limited basis than in the past, in order to give priority to national capacity building, community empowerment and advocacy. This approach takes into account the underlying and structural causes of the problems of children and women, such as the failure to tailor social policies and programmes to people's priority needs, the poor performance of the basic services, the inadequacy of the resources allocated to these sectors, and the regional disparities.

21. Pursuant to the two Conventions, the programme goals are to: (a) support the exercise of the rights of children and women; (b) help to improve the efficiency and effectiveness of the basic social services; (c) strengthen the national health policy; (d) improve school-enrolment by girls in the formal sector and develop non-formal education programmes; and (e) change people's behaviour and habits in order to improve their attitude towards children and women. More specifically, the goals are to contribute to the 50 per cent reduction in infant mortality and the 20 per cent increase in the numbers of girls attending primary school.

Social policies and statistics

22. The programme consists of two projects. The goals of the first project are to support the introduction of a coherent framework of social policies to promote the rights of children and women and to establish demonstration projects on decentralized planning. The second project provides strategic support for the replication and perpetuation of the sectoral programmes by improving the central national capacity with respect to planning, monitoring and evaluation, and by establishing a decentralized system, composed of the Administration, locally elected officials and NGOs, for planning the basic social services.

23. The social statistics project will strengthen the national capacity by setting up a team responsible for the collection and analysis of social statistics. It will support the conduct of studies, surveys, research and evaluations and the continuous updating of the assessment of the situation of children and women. The programme will be funded mainly from general resources, and the supplementary funds will be used to supplement the resources assigned to the strengthening of regional planning and monitoring

capacities.

24. The main partners in the execution of this programme will be the United Nations Development Programme (UNDP), Coopération française and the African Development Bank, institutions which are already working in the social sectors in Cameroon.

Health and nutrition

25. The health and nutrition programme will include a pilot project on the development of a community approach providing access to basic health services in Adamawa province and support for the national health policy. The goals are to: increase the health cover from 66 to 77 per cent and boost the cover of preventive and curative treatment from 60 to at least 80 per cent; enable 100 per cent of the health centres in Mora district and 70 per cent in the province's other districts to develop activities to prevent protein-calorie malnutrition among under-fives; and ensure a 75 per cent rate of provision of emergency obstetrical treatment for pregnant women and sick children in the three district hospitals. In addition the project will seek to secure a national consensus in support of the application of the strategies tested under the project.

26. At the central level the programme will furnish: (a) technical assistance for training in planning, supervision, training, and monitoring of operational research; (b) supplies of vaccines, ORS, vitamin-A tablets, and other items. There will be an urban component for the towns of Yaoundé and Douala. Close collaboration will be developed with the religious and international NGOs working in the areas covered by the programme. The results of the programme will be regularly reviewed at the central level. UNICEF will continue the education activities for young people under the joint programme co-sponsored by the United nations on HIV and AIDS and the dissemination of "Facts for Life" to influence/redirect the national policy.

27. General resources will be used at the national level to fund the capacity building activities in planning, supervision and monitoring, since the World Bank programme envisages the repair of infrastructures and provision of equipment and materials. In Adamawa province these funds will also be used to expand the strengthening of PBC. Supplementary funds will be used for activities connected with the revitalization of the health centres and supply of vaccines, ORS and vitamin A.

Basic education

28. The programme will include two projects, the first of which is designed to contribute to the attainment of basic education for all by 2010. It will also help to enhance the education policies and strategies for promoting access to education by girls. It will support the strengthening of the system for the collection and analysis of statistical data. In the Far North and East and the poorest areas of Douala and Yaoundé the more specific goal will be to increase school enrolment by girls by 20 per cent and reduce their drop-out rate by 15 per cent. The main activities include the conduct of feasibility studies, together with surveys on knowledge, attitudes and practices, with a view to the possible extension of the project to other poor

areas of the country. The second project is intended to establish mechanisms by means of which the targeted region can increase access by girls to the formal sectors of basic education. It will also initiate pre-vocational training for girls unqualified to take up such training.

29. General resources will be used at the national level to fund capacity building activities in planning, supervision and data collection. Supplementary funds will be used for the training of teachers, parents' associations and community leaders and for the provision of educational materials. The basic education programme has already acquired supplementary funds from the Norwegian Government for 1998-1999. The partners will be the World Bank, the United Nations Educational, Scientific and Cultural Organization and other donors, including the World Food Programme, which plans to support the programme components on school canteens and nutrition.

Advocacy and social communication

30. The advocacy and social communication programme has the general objective of promoting the establishment of a political, economic and social climate favourable to children and women. More specifically, the first project will seek to enhance the awareness of decision-makers with a view to the establishment of a legal and institutional framework for application of the Convention on the Rights of the Child and the Convention on the Elimination of all Forms of Discrimination against Women and to implement strategy 20/20. The second project will help to persuade the population to adopt practices and behaviour patterns favourable to the survival, protection and development of children and women. The populations of the areas of intervention of the other programmes will be particularly targeted. By means of its communication activities at the national level this programme will ensure the dissemination of information about the assessment of the situation of women and children and the Convention of the Rights of the Child. Special events will be organized in order to mobilize and increase the awareness both of decision-makers and the population at large about questions relating to children and the rights of women. The programme will be funded mainly from general resources. Supplementary funds will be used to facilitate national capacity building in communications and the production of audiovisual materials.

Programme management

31. The Planning Unit of the Ministry of the Economy and Finance, which provides the chair of the Government counterpart/UNICEF committee, will be the institution responsible for monitoring the cooperation programme. This will include annual reviews and a mid-term review in 2000, which will serve as milestones for the purposes of monitoring and evaluation. The technical activities will be coordinated by the social and economic ministries. The partnership with NGOs such as CARE, International Plan, the United States Peace Corps and the French and Netherlands Volunteers will be strengthened for the purposes of implementation of field activities in the Far North and the East owing to their experience and operational capacity.

32. The Development Aid Coordination Committee recently created by the Government with UNDP assistance will facilitate cooperation among the

organizations of the United Nations system and will provide an opportunity for UNICEF to contribute to the implementation of the programme to combat poverty within the context of the Convention on the Rights of the Child. The country strategy note, which the Government plans to adopt for the launching of the United Nations system's special initiative for Africa, is under preparation. UNICEF participates in the committees on women and basic services.

33. The management plan of the office established to implement the new programme and budget has necessitated a reduction of the supply component, which has entailed the closure of the Douala office responsible for this activity.

Monitoring and evaluation

34. An integrated monitoring and evaluation plan has been included in the programme. Sectoral plans have also been included, together with the key indicators necessary for ensuring continuous and systematic monitoring. Studies on knowledge, attitudes and practices and assessments will be undertaken in the areas of intervention in order to measure the programme's progress and impact, in particular with respect to altering behaviour patterns.

35. For the purposes of the harmonization of programmes, which will take place up to the year 2002, a committee of the organizations of the United Nations system has been set up under UNDP coordination. The current work, initiated in 1996, takes particular account of the situation of children and women.

TABLE 1. BASIC STATISTICS ON CHILDREN AND WOMEN

Cameroon	(1995 and earlier years)		UNICEF country classification
Under-five mortality rate	106	(1995)	High U5MR
Infant mortality rate	66	(1995)	High IMR
GNP per capita	$ 650	(1995)	Low GNP
Total population	13.2 million	(1995)	

KEY INDICATORS FOR CHILD SURVIVAL AND DEVELOPMENT		1970	1980	1990	1995
Births	(thousands)	299	389	473	527
Infant deaths (under 1)	(thousands)	38	41	37	35
Under-five deaths	(thousands)	64	67	59	56
Under-five mortality rate (per 1,000 live births)		214	173	125	106
Infant mortality rate (under 1) (per 1,000 live births)		127	105	79	66

		About 1980	Most recent
Underweight children (under 5) (% weight for age, 1978/1991)	Moderate & severe	17*	14
	Severe	..	3
Babies with low birth weight (%, 1981)		13	..
Primary school children reaching grade 5 (%, 1980/1990)		69	66

NUTRITION INDICATORS		About 1980	Most recent
Exclusive breast-feeding rate (<4 mos.) (%, 1991)		..	7
Timely complementary feeding rate (6-9 mos.) (%, 1991)		..	77
Continued breast-feeding rate (20-23 mos.) (%, 1991)		..	35
Prevalence of wasting (0-59 mos.) (%, 1978/1991)		2*	3
Prevalence of stunting (0-59 mos.) (%, 1978/1991)		36*	24
Daily per capita calorie supply (% of requirements, 1979-1981/1988-1990)		93	95
Total goitre rate ,(1991)		..	26
Household expenditure (% of total income, 1980 or 1985)	All food/cereals	.. / ..	24 / 7

HEALTH INDICATORS		About 1980	Most recent
ORT use rate (%)		..	..
Access to health services (% of population, 1985/1991)	Total	41	80
	Urban/rural	44 / 39	96 / 69
Access to safe water (% of population, 1980/1991)	Total	26	50
	Urban/rural	43 / 24	57 / 43
Access to adequate sanitation (% of population, 1985/1994)	Total	46	50
	Urban/rural	100 / 1	64 / 36
Births attended by trained personnel (%, 1991)		..	64
Maternal mortality rate (per 100,000 live births, 1990)		..	550

Immunization		1981	1985	1990	1995
One-year-olds (%) immunized against:	Tuberculosis	8	77	76	54
	DPT	5	50	56	46
	Polio	5	43	54	46
	Measles	16	39	56	46
Pregnant women (%) immunized against:	Tetanus	..	8	63	12

* Aged 3-48 months.

TABLE 1 (continued)

Cameroon

EDUCATION INDICATORS		About 1980	Most recent
Primary enrolment ratio (gross/net) (%, 1980/1994)	Total	98 / ..	89 / ..
	Male	107 / ..	93 / ..
	Female	89 / ..	84 / ..
Secondary enrolment ratio (gross/net) (%, 1980/1994)	Total	18 / 15	27 / ..
	Male	24 / 19	32 / ..
	Female	13 / 11	22 / ..
Adult literacy rate, 15 years & older (%, 1980/1995)	Total	44	63
	Male/female	59 / 30	75 / 52
Radio/television sets (per 1,000 population, 1980/1994)		88 / ..	148 / 24

DEMOGRAPHIC INDICATORS		1970	1980	1990	1994	2000
Total population	(thousands)	6612	8655	11484	13192	15129
Population aged 0-17 years	(thousands)	3173	4370	5877	6707	7594
Population aged 0-4 years	(thousands)	1150	1575	2016	2267	2550
Urban population (% of total)		20.0	31.0	40.0	45.0	49.0
Life expectancy at birth (years)	Total	44	50	54	55	57
	Male	43	48	53	54	56
	Female	46	51	56	57	58
Total fertility rate		6.2	6.4	5.9	5.5	5.1
Crude birth rate (per 1,000 population)		45	45	41	40	39
Crude death rate (per 1,000 population)		21	17	13	12	11

		About 1980	Most recent
Contraceptive prevalence rate (%, 1991)		..	16
Population annual growth rate (%, 1965-1980/1980-1995)	Total	2.0	2.9
	Urban	6.9	5.3

ECONOMIC INDICATORS		About 1980	Most recent
GNP per capita annual growth rate (%, 1965-1980/1985-1995)		2.4	-7.0
Inflation rate (%, 1970-1980/1985-1995)		10	2
Population in absolute poverty (%, 1979)	Urban/rural	15 / 40	.. / ..
Household income share (%)	Top 20%/bottom 40%	.. / ..	.. / ..
Government expenditure (% of total expenditure, 1983/1993)	Health/education	4 / 13	5 / 18
	Defence	9	9
Household expenditure (% share of total, 1980 or 1985)	Health/education	.. / ..	12 / 9
Official development assistance: (1980/1994)	$US millions	264	731
	As % of GNP	3	8
Debt service (% of goods and services exports(1982/1994)		13	13

TABLE 2. EXPENDITURE UNDER PREVIOUS COOPERATION PERIOD, 1991-1997 a/

COUNTRY: CAMEROON
LATEST BOARD APPROVAL: 1995
GENERAL RESOURCES: $9 047 120

(In thousands of United States dollars)

Programme sectors/areas	Supplies and equipment (actual)		Training grants (actual)		Project staff (actual)		Other cash (actual)		TOTAL					
									General resources b/		SF		Total (GR & SF)	
	GR b/	FSF	GR b/	FSF	GR b/	FSF	GR b/	FSF	Actual	Planned c/	Actual	Planned d/	Actual	Planned
Health	1 820	2 932	233	90	956	178	762	491	3 771	4 013	3 691	6 920	7 462	10 933
Water supply and sanitation	354	305	24	3	457		775	485	1 610	1 630	793	2 450	2 403	4 080
Education	295	298	176	71	49	64	353	204	873	1 257	637	1 680	1 510	2 937
Social mobilization and advocacy	220		13		22		416		671	680		615	671	1 295
Programme support	185		131		736		533		1 585	1 467			1 585	1 467
Emergency	160								160				160	
GRAND TOTAL	3 034	3 535	577	164	2 220	242	2 839	1 180	8 670	9 047	5 121	11 665	13 791	20 712

GR = General resources.
FSF = Funded supplementary funding.
SF = Supplementary funding, funded and unfunded.

a/ Actual expenditure includes expenditure recorded as of June 1997.

b/ Actual GR expenditure includes allocations from global funds.

c/ Includes additional general resources of $597 120 (E/ICEF/1994/P/L.31), additional general resources of $750 000 (E/ICEF/1995/P/L.28) and $2 800 000 (E/ICEF/1995/P/L.28) for 1996-1997 bridging programme.

d/ Includes two years bridging of $6 000 000 (E/ICEF/1995/P/L.28) for 1996-1997.

TABLE 3

COUNTRY: CAMEROON
PROGRAMME CYCLE : 1998-2002

PLANNED YEARLY EXPENDITURES

		1998	1999	2000	2001	2002	TOTAL
SOCIAL POLICY AND STATISTICS	GR	350,000	350,000	350,000	350,000	350,000	1,750,000
	FSF						
	NSF	200,000	200,000	200,000	200,000	200,000	1,000,000
	TOTAL	550,000	550,000	550,000	550,000	550,000	2,750,000
HEALTH/NUTRITION	GR	448,248	442,487	438,035	432,408	426,322	2,187,500
	FSF						
	NSF	500,000	500,000	500,000	500,000	500,000	2,500,000
	TOTAL	948,248	942,487	938,035	932,408	926,322	4,687,500
BASIC EDUCATION	GR	300,000	300,000	300,000	300,000	300,000	1,500,000
	FSF	308,200	282,734				590,934
	NSF	200,000	200,000	500,000	500,000	500,000	1,900,000
	TOTAL	808,200	782,734	800,000	800,000	800,000	3,990,934
ADVOCACY/SOCIAL COMMUNICATIONS	GR	100,000	100,000	100,000	100,000	100,000	500,000
	FSF						
	NSF	100,000	100,000	100,000	100,000	100,000	500,000
	TOTAL	200,000	200,000	200,000	200,000	200,000	1,000,000
CROSS-SECTORAL COSTS	GR	101,752	107,513	111,965	117,592	123,678	562,500
	FSF						
	NSF						
	TOTAL	101,752	107,513	111,965	117,592	123,678	562,500
TOTAL, PROGRAMME BUDGET	GR	1,300,000	1,300,000	1,300,000	1,300,000	1,300,000	6,500,000
	FSF	308,200	282,734				590,934
	NSF	1,000,000	1,000,000	1,300,000	1,300,000	1,300,000	5,900,000
	TOTAL	2,608,200	2,582,734	2,600,000	2,600,000	2,600,000	12,990,934
STAFF COSTS a/		720,331	768,030	819,129	873,741	931,699	4,112,930
GENERAL OPERATING COSTS		373,000	395,200	385,800	426,000	423,100	2,001,100
TOTAL, ESTIMATE SUPPORT BUDGET		1,093,331	1,163,230	1,204,929	1,297,741	1,354,799	6,114,030
GRAND TOTAL		3,701,531	3,745,964	3,804,929	3,897,741	3,954,799	19,104,964

GR = general resources.
FSF = funded supplementary funding.
NSF = new supplementary funding.

a/ Including consultants and temporary assistance.

TABLE 4

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

COUNTRY : CAMEROON
PROGRAMME : 1998-2002

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET				POSTS a/										STAFF COSTS b/		
	GR	FSF	NSF	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
GENERAL RESOURCES :																	
SOCIAL POLICY AND STATISTICS	1,750,000			1,750,000	0	0	0	0	0	0	0	1	1	2	0	222,351	222,351
HEALTH/NUTRITION	2,187,500			2,187,500	0	0	0	1	0	0	1	1	0	2	897,106	181,537	1,078,643
BASIC EDUCATION	1,500,000			1,500,000	0	0	0	0	0	0	0	1	0	1	0	181,537	181,537
ADVOCACY/SOCIAL COMMUNICATIONS	500,000			500,000	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTORAL COSTS	562,500			562,500	0	0	0	0	0	0	0	1	2	3	0	346,951	346,951
TOTAL GR	6,500,000			6,500,000	0	0	0	1	0	0	1	4	3	8	897,106	932,376	1,829,482
SUPPLEMENTARY FUNDING :																	
SOCIAL POLICY AND STATISTICS		0	1,000,000	1,000,000	0	0	0	0	0	0	0	0	1	1	0	48,259	48,259
HEALTH/NUTRITION		0	2,500,000	2,500,000	0	0	0	0	0	0	0	0	1	1	0	48,259	48,259
BASIC EDUCATION		590,934	1,900,000	2,490,934	0	0	0	0	1	0	1	0	0	1	765,110	0	765,110
ADVOCACY/SOCIAL COMMUNICATIONS		0	500,000	500,000	0	0	0	0	0	0	0	0	0	0	0	0	0
CROSS-SECTORAL COSTS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL SF		590,934	5,900,000	6,490,934	0	0	0	0	1	0	1	0	2	3	765,110	96,518	861,628
TOTAL GR & SF	6,500,000	590,934	5,900,000	12,990,934	0	0	0	1	1	0	2	4	5	11	1,662,216	1,028,894	2,691,110
SUPPORT BUDGET			Operating costs	2,001,100													
			Staffing		0	0	1	1	1	0	3	2	9	14	2,736,630	1,376,300	4,112,930
GRAND TOTAL (GR + SF + SB)					0	0	1	2	2	0	5	6	14	25	4,398,846	2,405,194	6,804,040
Number of posts and staff costs:																	
Current programme cycle											5	5	24	34			
At the end of proposed programme cycle (indicative only)											5	6	14	25	4,398,846	2,405,194	6,804,040

GR = general resources.
SF = supplementary funding.
FSF = funded supplementary funding.
NSF = new supplementary funding.
IP = international Professional.
NP = national Professional.
GS = General Service.
SB = support budget.

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.

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